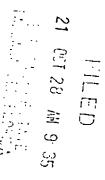
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Office Use Only



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2021 OCT 28 PH 12: 12

T. LEMIEUX OCT 2 9 2021

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 173630 8329438 AUTHORIZATION : COST LIMIT : \$ 1,000.00

ORDER DATE: October 27, 2021

ORDER TIME : 10:02 AM

ORDER NO. : 173630-005

CUSTOMER NO: 8329438

DOMESTIC FILING

NAME: CITRUS GLEN PRESERVATION, LTD.

EFFECTIVE DATE:

| | ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION |
|---------|---|
| PLEASE | RETURN THE FOLLOWING AS PROOF OF FILING: |
| XX | CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING |
| CONTACT | PERSON: Evliena Baker - EXT. |

EXAMINER'S INITIALS:

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| SUBJECT: Citrus Glen Preserva | |
| Name of Florida Limited | Partnership or Limited Liability Limited Partnership |
| The enclosed Certificate of Limited Part | nership and fees are submitted for filing. |
| Please return all correspondence concerr | ning this matter to: |
| Jonathan Gruskin | |
| Contact Person | |
| Ulysses Development Group, LLC | |
| Firm/Company | |
| 210 University Blvd, Ste 77 | |
| Address | |
| Denver, CO 80206 | |
| City, State and Zip Code | |
| ryan.omalley@stanfieldcpa.com | |
| E-mail address: (to be used for future annu- | al report notification) |
| For further information concerning this r | natter, please call: |
| Ryan O'Malley | at (646) 318-4313 |
| Name of Contact Person | Area Code and Daytime Telephone Number |
| Enclosed is a check for the following am | ount: |
| \$1,000.00 Filing Fees \$1,008.75 Filing F and Certificate of Status Fee) | and Certified Copy \$1,052.50 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building 2661 Executive Center Circle | P. O. Box 6327 |
| Tallahassee, FL 32301 | Tallahassee, FL 32314 |

CR2E030 (01/06)

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

| 1. Citrus Glen Preservation, Ltd | |
|---|---|
| (Name of Limited Partnership or Limited Liability Limited Partnership, which muss Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership. | l |
| 2. 210 University Blvd, Ste 77 | |
| (Street address of initial designated office) | |
| Denver, CO 80206 | |
| 3. Corporation Service Company | |
| (Name of Registered Agent for Service of Process) | |
| 4 1201 Hays Street | |
| (Florida street address for Registered Agent) | |
| Tallahassee, FL 32301 | |
| 5. I hereby accept the appointment as registered agent and agree to act in this capacity comply with the provisions of all statutes relative to the proper and complete performant and I am familiar with and accept the obligations of my position as registered agent. Corporation Service Company By: By: | |
| Signature of Registered Agent | |
| 6,210 University Blvd, Ste 77 Denver, CO 80206 | |
| 0, <u>218 21118 2114, 213 11 2211101, 44 232</u> | |

| 8. Name and business address of e Name: | ach general partner: Business Address: |
|---|--|
| Jonathan Gruskin | 210 University Blvd, Ste 77 |
| | Denver, CO 80206 |
| | |
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| | |
| 9. Effective date, if other than the date of | filing: |
| (Effective date cannot be prior to n filed by the Florida Department of | or more than 90 days after the date the document is State.) |
| Signed this 20 day | ofOctober , 2021 |
| stated herein are true. I/We am/are | /We submit this document and affirm that the facts aware that any false information submitted in a te constitutes a third degree felony as provided for in |
| Filing Fees: Certified Copy (optional): Certificate of Status (optional): | \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 Page 2 of 2 |